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50 per cent of "takes"; but when obtained direct from the manufacturer, "takes" were nearly 100 per cent. Vaccine virus at pharmacies is often kept in the cellar or in the soda fountain cooler, and the temperature of these places, both winter and summer, has been found to be in the neighborhood of 15° C. (59° F.) or higher. This is by no means satisfactory. Ice-box temperature is not freezing temperature, but usually several degrees above freezing. Vaccine virus should be kept in a metal container in constant contact with the ice itself. If it can be kept at or below the freezing point, so much the better. There is no danger of keeping it too cold.

SMALLPOX.

The mild type of smallpox has been widely prevalent in the United States since 1898. The tables which follow show the number of cases reported in cities during the five weeks ended April 21, and the counties in which 10 or more cases were reported during the month of March. The disease has appeared to be universally of the mild type except in Austin, Tex., where the virulent type is present.

For additional information concerning the current prevalence of smallpox see pages 707-709.

Cases of smallpox reported in cities during 5 weeks ended Apr. 21, 1917.

Place.	Number of cases reported.	Place.	Number of cases reported.
Akron, Ohio.....	12	Madison, Wis.....	19
Ann Arbor, Mich.....	3	Marionette, Wis.....	4
Austin, Tex.....	76	Milwaukee, Wis.....	2
Baltimore, Md.....	8	Minneapolis, Minn.....	154
Birmingham, Ala.....	2	Muscatine, Iowa.....	4
Buffalo, N. Y.....	1	Nashville, Tenn.....	2
Butte, Mont.....	19	New Castle, Pa.....	3
Cairo, Ill.....	20	New Orleans, La.....	46
Chicago, Ill.....	14	New York, N. Y.....	2
Cincinnati, Ohio.....	5	Oakland, Cal.....	9
Cleveland, Ohio.....	50	Ogden, Utah.....	1
Covington, Ky.....	14	Oklahoma City, Okla.....	42
Danville, Ill.....	32	Omaha, Nebr.....	29
Davenport, Iowa.....	9	Pittsburgh, Pa.....	3
Denver, Colo.....	1	Pontiac, Mich.....	16
Detroit, Mich.....	16	Portland, Oreg.....	5
Dubuque, Iowa.....	3	Quincy, Ill.....	3
Duluth, Minn.....	26	Roanoke, Va.....	2
East Chicago, Ind.....	12	Rockford, Ill.....	4
El Paso, Tex.....	5	Rocky Mount, N. C.....	2
Evansville, Ind.....	20	St. Joseph, Mo.....	85
Flint, Mich.....	16	St. Louis, Mo.....	57
Fort Wayne, Ind.....	6	St. Paul, Minn.....	9
Fort Worth, Tex.....	4	Salt Lake City, Utah.....	22
Galveston, Tex.....	4	San Francisco, Cal.....	32
Grand Rapids, Mich.....	7	Seattle, Wash.....	1
Hartford, Conn.....	1	Sioux City, Iowa.....	9
Indianapolis, Ind.....	32	Springfield, Ill.....	2
Jackson, Mich.....	1	Steeleton, Pa.....	2
Kansas City, Mo.....	19	Toledo, Ohio.....	8
Kokomo, Ind.....	6	Topeka, Kans.....	1
La Crosse, Wis.....	1	Washington, D. C.....	1
Lima, Ohio.....	42	Wichita, Kans.....	12
Little Rock, Ark.....	29	Worcester, Mass.....	2
Los Angeles, Cal.....	2	Zanesville, Ohio.....	5

¹ Reports for 3 weeks not received.

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Counties in which 10 or more cases of smallpox were reported during March, 1917, showing number of cases reported.

State.	Number of cases reported.	State.	Number of cases reported.
Arkansas:		Michigan:	
Garland County.....	14	Alpena County.....	23
Greene County.....	15	Genesee County.....	12
Lawrence County.....	10	Ingham County.....	13
Mississippi County.....	53	Oakland County.....	29
Polk County.....	12	Wayne County.....	16
White County.....	12	Minnesota:	
California:		Hennepin County.....	156
San Bernardino County.....	15	Olmsted County.....	24
San Francisco County.....	31	Polk County.....	10
Kansas:		Ramsey County.....	16
Barton County.....	18	St. Louis County.....	26
Coffey County.....	18	Wright County.....	10
Crawford County.....	37	Oregon:	
Doniphan County.....	13	Clatsop County.....	13
Logan County.....	14	South Carolina:	
Marion County.....	40	Edgefield County.....	12
Sedgwick County.....	17	Wisconsin:	
Shawnee County.....	16	Calumet County.....	25
Sumner County.....	17	Chippewa County.....	12
Wabaunsee County.....	19	Dane County.....	14
Louisiana:		Marinette County.....	10
Assumption Parish.....	11		
Orleans Parish.....	87		

CONFERENCE OF HEALTH AUTHORITIES.

UNITED STATES PUBLIC HEALTH SERVICE IN ANNUAL CONFERENCE WITH STATE AND TERRITORIAL HEALTH AUTHORITIES, WASHINGTON, APRIL 30 AND MAY 1, 1917.

The fifteenth annual conference of the State and Territorial health authorities with the Public Health Service of the United States was held April 30 and May 1, 1917, in the city of Washington. This conference is held annually pursuant to an act of the Congress approved July 1, 1902.

The following were among the matters brought before the conference for its consideration:

The need and advisability of correlating the Federal, State, and local health authorities and agencies to effect a maximum of cooperative efficiency in times of national emergency.

Reciprocal notification by State and Territorial authorities of disease carriers traveling or about to travel from one State or Territory to another.

Minimum standard morbidity tables for use in annual reports of State and Territorial health authorities showing the prevalence and geographic distribution of cases of the notifiable diseases.

What constitutes an epidemic or unusual prevalence of a disease.

The typhus fever situation as it affects the United States and the best means of handling it.

Are health authorities using all available information and known means to reduce the morbidity from pneumonia, syphilis, and tuberculosis.

The sanitation of public conveyances.

Interstate quarantine regulations.

Intrastate quarantine regulations.

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